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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations				
Jabby Creations LLC SUBJECT:				
	ne of Limite	ed Liability Company		
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Off	fice Change	and fee(s) are submitted for filing.		
Please return all correspondence concerning th	nis matter to	the following:		
Candice Bakke				
Name of Person		 -		
Jabby Creations LLC				
Firm/Company				
4876 Valley Field Drive				
Address				
Oldsmar, FL 34677				
City/State and Zip Code			ä	
LuLaRoeCandiceBakke@gmail.com				
E-mail address: (to be used for future and	iual report r	notification)	•	
For further information concerning this matter.	, please call	:	• 1	
Candice Bakke	727	483-2607	ري ات اس	TATE TATE
Name of Person		Area Code & Daytime Telephone Number		75
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following	; amount:			
□ \$25 Filing Fee	Ĩ.	\$55 Filing Fee & Certified Copy		

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116. Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

L. Na	ame of the limited liability company: Jabby Creation	ons LLC	
2. (a)	4876 Valley Field Drive	ر _(b) ک	1876 Valle I Field Dr.
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Oldsmar, FL 34677	_ ()ldsmar, FL34677
	August 16, 2017		7000174928
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	United States Corporation Agents		
7. (u)	Registered Agent and Registered Office shown on the records of 13302 Winding Oak Court	the Florida Dep	of State:
	Registered Office Address (MUST BE FLORIDA STREET Unit A	<u>ADDRESS)</u>	
	Tampa .FI	33612	
(b)	Andrew Bakke Enter name of NEW Registered Agent and/or NEW Registered 4876 Valley Field Drive	l Office addres	- 13 (No. 1) (
	NEW Registered Office Address:		PH 3: 57
	Oldsmar . Fi	34677	
the chargent was/w was/w the art Signal I here provise the object of mer	imited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited liere authorized by an affirmative yote of the members icles of organization or the operating agreement of the direction of a member of authorized representative of a member by accept the appointment as registered agent and agoing of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address. It is a supposition of this change.	f the register iability comp of the limited liab Candid	ed office and the business office of the registered rany, it is hereby confirmed that the change(s) I liability company or as otherwise provided in ility company. De M. Bakke Printed or typed name of signce this capacity. I further agree to comply with the e of my duties, and I am familiar with and accept near 605. F.S. Or, if this document is being filed

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000174928

Entity Name: JABBYCREATIONS, LLC

Current Principal Place of Business:

4876 VALLEY FIELD DRIVE OLDSMAR, FL 34677

Current Mailing Address:

4876 VALLEY FIELD DRIVE OLDSMAR, FL 34677 US

FEI Number: 82-2535611

Certificate of Status Desired: No

FILED Feb 07, 2019

Secretary of State

2961981352CC

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC. 13302 WINDING OAK COURT

TAMPA, FL 33612 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CANDICE BAKKE

02/07/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail:

Title

AMBR

Name

BAKKE, CANDICE M

Address

4876 VALLEY FIELD DRIVE

City-State-Zip: OLDSMAR FL 34677

Effective certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.